EXHIBIT D

MEDICAL TESTIMONY

to treatment of child patients with ICP using a novel technique with the aid of the loading suit $\pi K-92$ "Adeli" at the Municipal Rehabilitation Treatment Center for children, City of Nizhni Novgorod

Every year about two thousand child patients suffering from various pathologies pass through the Center, including 250-300 children with infantile cerebral paralysis.

The treatment technique using the therapeutic loading suit $\pi K-92$ "Adeli" has been applied for treating the patients with ICP since March, 1995, after the specialists of our Center have passed training in this treatment technique under the guidance of Prof. K.A. Semenova on the basis of the Kaluga Bor Preventorium.

From March to July, 1995, the suit was applied for treating 23 patients with ICP, aged from 11 to 16, of whom ten patients with spastic diplegia, eight patients with the hemiparetic form, three patients with the atonic-astatic form, and two patients with the hyperkinetic form.

The patients were selected with strict account of indications and contraindications for use of the present treatment technique.

The treatment course lasted 20 days, with daily sessions of from one hour and a half to two hours. Each of the patients was given a single treatment course.

The therapeutic suit "Adeli" was used in combination with other procedures and techniques commonly adopted for treating

ICP, that is, massage, therapeutic exercise, physiotherapy reflexotherapy, logopedic exercises, studies with a teacher, and medicinal correction. The treatment efficiency was assessed clinically.

The results obtained from the ambulant use of the therapeutic loading suit were as follows: an improvement was noted in 83% of the cases, whereas the efficiency of treatment without applying the new technique was 70-73%.

The best results were obtained from the treatment of the patients with spastic diplegia, hemiparetic, and hyperkinetic ICP forms.

Virtually all the patients with spastic ICP forms exhibited an increased extent of voluntary motions. The extent of active and passive movements in the joints increased by 5-10 degrees. The gait was improved, that is, correct pace movements were formed, the pace length is increased, and the sagittal and frontal trunk rocking motion while walking was reduced.

Coordination of movements was improved, and voluntary motions became less sweeping. The hyperkinetic ICP patients exhibited not only a reduced amount of hyperkinesis but also a less pronounced speech disturbances. An emotional status of the patients was much improved.

At present, we have acquired four such suits for children of 3 to 5 years old. In September and October of the instant year, a total of 17 child patients were admitted for treatment at the Center, of whom one patient has learned walking, two patients, standing, and one patient, sitting without attendance. The treatment of one patient was ineffective.

The rest of the patients treated developed correct pace movements and exhibited an increased extent of motions in the joints of the limbs, a reduced myogenic tonus, and an improved coordination of movements.